S&H Form: PTO/SB/30 (12/04)

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

(INCLUDING FILING FEE AND/OR PETITION FOR EXTENSION OF TIME FEE)

Subsection (b) of 35 U.S.C. §132, effective May 29, 2000 provides for continued examination of a utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA)

To: Commissioner for Patents Box RCE PO Box 1450 Alexandria, VA 22313-1450		Attorney Docket No.:1095.1149			
First Named Inventor	Isamu OOISHI	1			
Application No.	09/756,226	Group Art Unit	2176		
Filing Date	January 9, 2001	Examiner	Chau T. Nguyen		
CPA Filing Date		Confirmation No	6990		
Title of Invention	SYSTEM AND PROGR USED IN DYNAMIC DO	AM FOR PROCESSING S DCUMENTS	SPECIAL CHARACTERS		
application.	or Continued Examination (RCE) under 37 C.F.R. §1.	114 of the above-identified		
Submission require a. Previously submission	d under 37 C.F.R. §1.114 (Box a or b must be compl	eted)		
i. ☐ Consider th (Any unente ii. ☐ Consider th iii. ☐ Other b. ☒ Enclosed i. ☒ Amendme ii. ☐ Affidavit(s	ne amendment(s)/reply under 37 red amendment(s) referred to ab e arguments in the Appeal Brief	ove will be entered).			
Miscellaneous					
a. Suspension of	action on the above-identified ap hs. (Period of suspension shall not e				
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				BASI	O FEE		\$	79
is hereby made which the requ	al Action set an <u>c</u> e for an extension isite fee is enclos 0)); (4 months (\$	n of time sed (1 r	e to cover t month (\$12	the date tl 0)); (2 mc	his RCE is fil onths (\$450))	ed, for		\$4
Claims As Amended	Claims Remaining After Amendment	Highe Previou	est Number usly Paid For	Number Extra	Rate			
Total Claims	16	20	- 20 =	0	X \$50.00	terren yanga		\$
Independent Claims	3	5	- 3 =	0	X \$200.00			\$
Suspension Fe	ee (\$130.00)							
Total of above Calculations =							\$	12
Reduction by 50% fo	or filing by small entity (Note 37 C	D.F.R. 1.9, 1.27	, 1.28).				**************************************
TOTAL FEES DUE =							\$	12
☐ A che	still proper and is no longer cla Compared to the state of the state	imed. of \$ <u>\$1</u>	240.00 is			(A duplicat	e copy of th	is form is enc
5. Other 6. METHOD A cher Charg 7. GENERAL The Comma 7 C.F.R.	is no longer classing of PAYMENT ck in the amount e "TOTAL FEES AUTHORIZAT missioner is hereby aut 1.17 (processing fees)	of \$_\$1 DUE" t	240.00 is to Deposit.	Account N	No. 19-3935.	nal fees un	der 37 C.F.J	₹. 1.16 (filing
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